PART B - FEE(S) TRANSMITTAL						
/		her with applicable	P.C Ale	uil Stop ISSUE FI mmissioner for P D. Box 1450 exandria, Virginia 1)-273-2885	atents	
INSTRUCTIONS: The form should be seed for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence address as indicated unless corrected be a frected otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.						
	ENCE ADDRESS (Note: Use BI	ock 1 for any change of address)	Fee(s) Transmittal. This co	ertificate cannot be used for	r domestic mailings of the or any other accompanying nt or formal drawing, must
OLIFF & BERRIDGE, PLC P.O. BOX 320850 ALEXANDRIA, VA 22320-4850 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with States Postal Service with sufficient postage for first class mail in a addressed to the Mail Stop ISSUE FEE address above, or bein transmitted to the USPTO (571) 273-2885, on the date indicated bel						
(Depositor						
(Signature)						
		 	<u></u>	1		(Date)
APPLICATION NO. FILING DATE 10/653,217 09/03/2003		FIRST NAMED INVENTOR Masanori Satake	OR ATTORNEY DOCKET NO. CONFIRMATION I		CONFIRMATION NO.	
TITLE OF INVENTION: JOB PROCESSING DEVICE AND DATA MANAGEMENT METHOD FOR THE DEVICE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	E TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/25/2009
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS			
DAVIS, ZACHARY A 2437			713-190000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Fuji Xerox, Co., Ltd. Tokyo, JAPAN						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) Solution Issue Fee Publication Fee (N Advance Order -	No small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Ck#214448 Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form).			
5. Change in Entity Sta	itus (from status indicate as SMALL ENTITY statu	•	b. Applicant is no long	ger claiming SMALL	ENTITY status. See 37 CI	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepted tes Patent and Trademark	d from anyone other than to Office.	he applicant; a register	ed attorney or agent; or th	e assignee or other party in
Authorized Signature 26, 2009						
_	e Jonathan H	Backenstose	Book 1227 2009 [APDY 3 00000030 10653217			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a belief by the public which is to file (and by the public whi						